



Veterans'

HealthMatters

Winter 2002

The Wellness
Magazine from
the VA Sierra
Pacific Network

Network highlights

**Hepatitis C:
Are you aware of this
growing health threat?**

**Running out of miracles:
Proper use of antibiotics**

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Network *Highlights*

Upgrading our infrastructure

During your next visit to a VA hospital or clinic in the Network, you may notice renovated space, additional buildings or even a brand-new medical center. We are working hard to have the best possible VA facilities so we may meet all your health care needs.

In the following articles, you can read about the new VA medical center under construction in Sacramento, the upgraded cardiac catheterization laboratory in San Francisco and the completed clinical wing in Reno. What may not be as obvious are the improvements in our equipment and technology. These are the new tools that allow our skilled and dedicated staff to provide you the best health care services.

We have added new state-of-the-art diagnostic and therapeutic medical devices at many locations. Some of the following stories present examples of how VA is using leading-edge technology, including the Internet and telemedicine, to deliver the most modern health care. And finally, you will note our efforts to ensure that you will feel safe and secure when you come to any VA facility.

The Network is proud to be part of our nation's largest and finest civilian health care system. We will keep on upgrading our infrastructure so you can continue to count on VA for the best.

—Robert L. Wiebe, M.D., M.B.A.
Director, VA Sierra Pacific Network

VA Palo Alto Health Care System (VAPAHCS): Named in 100 Most Wired

VAPAHCS has been named one of the nation's "100 Most Wired" hospitals and health care systems by *Hospitals and Health Networks*, the journal of the American Hospital Association. The prestigious award is based on the third annual survey, which polled the nation's health care systems on their use of Internet technologies to connect with patients, physicians, nurses, payors, health plans and employees.

"Being named one of the nation's Most Wired hospitals demonstrates our commitment to advancing the electronic management of health care information," said Eric Raffin, associate

chief information officer.

More than 280 hospitals and health systems replied to the survey, representing 1,177 hospitals. This is the first time VAPAHCS has been named to the list.

VA Medical & Regional Office Center Honolulu (VAM&ROC): Telecommunication grant

The VAM&ROC received a \$36,727 grant to subsidize broadband and high-speed circuits that connect outpatient clinics on the neighbor islands to the Honolulu medical center. The network supports management and clinical information systems and telehealth and telemedicine applications. It also makes possible quality video teleconferencing among Honolulu sites and

other health care providers in Hawaii and the Pacific.

"To meet the needs of veterans, it is important to recognize the significance of a high-speed telecommunications network to deliver and improve quality, accessibility and cost effectiveness of health care services," said H. David Burge, VAM&ROC director.

The Rural Health Care Division, Universal Service Administration Company provided the generous grant, the first ever to be awarded to a VA medical center.

San Francisco VA Medical Center (SFVAMC): Cardiac cath lab upgrade

"Putting Veterans First" took a major step forward when the

Veterans' HealthMatters is intended to provide supplemental health information. Individuals should consult their primary care provider before pursuing any treatment alternatives.

newly upgraded cardiac catheterization laboratory was dedicated on August 24. The cath lab has always offered veterans a full range of quality diagnostic services for heart disease assessment, coronary angiography, cardiac biopsy and interventional procedures for a variety of cardiac treatments. Now, the new equipment upgrade offers improved, faster digital imaging and requires less maintenance.

The upgrade is good news for everyone. For veterans, it reduces the amount of time spent in the cath lab, minimizes the risk of complications and increases comfort and convenience. For SFVAMC, the time for each cath lab case will decrease and allow for the total number of cases to increase significantly. There is an interventional cardiologist on staff at all times to ensure veterans have access to the most up-to-date cardiac catheterization care.

VA Central California Health Care System (VACCHCS): Officers armed

As part of a nationwide effort to arm VA police and security officers at VA facilities, VACCHCS Fresno has become the first in the Sierra Pacific Network to implement the VA Firearms Program by arming all officers on station with weapons. The purpose is to ensure patient, visitor and staff safety by giving officers additional tools to enhance their ability to cope with the rise in violent incidents at VA facilities across the nation.

"We have the highest confi-

dence in our officers," said Michael Blathers, chief, Police and Security Service. "Implementation of the program creates a safer environment for everyone who comes in the facility."

The program was implemented with oversight and guidance from the Office of the Deputy Assistant Secretary for Security and Law Enforcement at VA Central Office. Fresno VA officers passed both psychological and physical tests and participated in extensive classroom and hands-on training at the firing range.

VA Northern California Health Care System (VANCHCS): Expanding inpatient services



Improvements and expansion of services for northern California veterans continues at VANCHCS with the ongoing construction of a new five-story inpatient tower at the Sacramento VA Medical Center at Mather.

The \$39.5 million tower will increase the number of inpatient beds from 34 to 55 and will include 30 medical/surgical beds, 15 mental health beds and 10 intensive care unit beds.

In addition to increased inpatient bed capacity, the tower will house a cardiac catheterization lab, a gastrointestinal/endoscopy suite, angiography capability and the new General Clinical Research Center, which includes

a 16,000-square-foot research lab. The new inpatient tower is scheduled to open in summer 2002.

Upon completion of the new tower, renovation and asbestos abatement of the existing tower will begin. This renovation will provide improved clinical and support space and is estimated for completion in 2004.

VA Sierra Nevada Health Care System (VASNHCS): Serving you better

How we deliver your care is our primary focus at VASNHCS. Ongoing renovation and construction at the Ioannis A. Lougaris VA Medical Center, Reno, is central to improving our efficiency and serving you better.

Construction of the new clinical wing, an addition to building 1D on the west side of the campus, is almost complete. The ground floor, which will house Pharmacy Service, will soon be open. Noticeable benefits include improved privacy for patients checking in with the pharmacy and a larger and more comfortable waiting area. Behind the scenes, this move will greatly enhance the efficiency of both the inpatient and outpatient pharmacy, ultimately reducing prescription waiting time.

The Pre-Admission Testing and Processing Unit (PATPU) will also move into the clinical wing. PATPU is the first stop for patients coming in for same-day surgery. Radiology and the operating rooms are also located in the clinical wing, allowing for a speedier admission process. ★

Keeping your eyes and ears open



It is a common problem. As you get older, your eyesight worsens and your hearing ability lessens. Much of this is just part of aging. But you can help preserve your vision and hearing by using the following tips and discussing any concerns you have with your VA primary care provider.

LOOKING SHARP

Take your eyesight for granted? It sure is easy to do. Yet the day will come when focusing on the printed word will be a challenge. Luckily, most vision problems are easy to correct. As for more serious disorders, regular

checkups can ensure early detection and timely treatment.

How often

Eye exams are not just for people who wear glasses. By age 40, everyone should have had their eyes checked at least once. From 40 to 64, an exam is advisable every two to four years. And those 65 and older should have a yearly checkup. (People with special conditions may need more frequent visits.)

As a person gets older, regular exams are vital to monitor for age-related disorders, such as cataracts, macular degeneration and glaucoma. The latter two condi-

DON'T SKIP YOUR EYE EXAM IF ...

- you're nearsighted
- you have diabetes
- you've had an eye injury
- you have a family history of glaucoma

And see your ophthalmologist immediately if you experience ...

- a sudden burst of sparks or flashing lights
- a shower of floaters—small specks, spots, strings or squiggles that float across your visual field
- sudden difficulty seeing
- blurred vision

tions usually have no symptoms until vision is severely affected. By that time, it may be too late.

What to expect

During your exam, you'll be

asked for your family and personal medical history. Your ophthalmologist will want to know if you have diabetes or high blood pressure, both of which may affect vision. Now is also the time to discuss any complaints.

After checking your lids and lashes, your doctor may apply drops to dilate your pupils and use a light called an ophthalmoscope to examine the inside of your eye. The condition of the tissues and vessels within the eye can reveal the presence of

diabetes, tumors, circulatory disorders and high blood pressure as well as retinal detachment and macular degeneration.

To test the movement of your eyes, your ophthalmologist may ask you to follow his or her hands. And to assess your peripheral vision, he or she may move an object in and out of your visual field.

Tonometry, a painless test, helps your ophthalmologist check for glaucoma by measuring the pressure within your

eyeball. Glaucoma occurs when fluid buildup within the eye puts prolonged pressure on the optic nerve.

HOW'S YOUR HEARING?

You've relied on your ears all your life without really thinking about it. But recently, you find it more difficult to understand what people are saying, especially women and children. You also have a hard time following group conversations, and there's an annoying ring in your ears. What's going on? Probably, you're noticing the signs of age-related hearing loss.

This type of hearing loss happens so gradually that many people pay no attention to it. That's unfortunate because, in some cases, the damage can be halted. Most people aren't aware that using equipment or appliances such as lawn mowers, leaf blowers and hair dryers may lead to hearing loss. If you use these items, consider wearing earplugs.

What you can do

There's no medical or surgical treatment for age-related hearing loss, but a hearing aid can help you keep up with the conversation around you. An estimated 25 million Americans could benefit from wearing a hearing aid, but only one-fifth of them do so.

If you've noticed hearing loss or tinnitus (noise in the ear), see your doctor. He or she can determine what type of loss you have (some types are treatable) and refer you to an ear or hearing specialist, if necessary. ★

3 WAYS TO MAKE HEARING EASIER

Try these tricks to help you follow what people are saying:

1. Reduce background noise. Turn off the television or radio. Run the dishwasher only when you're asleep. Shut the window if street noise is making it difficult for you to hear someone.
2. Look directly at the person you're speaking with. Facial expressions and gestures will help you understand what he or she is saying.
3. Speak up. If you can't make out what someone is saying, ask him or her to face you directly, talk more slowly and come closer or talk more loudly.



ARE YOU ELIGIBLE?

Unlike most VA medical programs, there are some eligibility limitations for veterans requesting either eyeglasses or hearing aids. You may be eligible for eyeglasses or hearing aids if you:

- have a compensable service-connected disability
- are a former prisoner of war
- are currently enrolled in a VBA vocational rehab program
- receive increased pension based on the need for regular aid and attendance or by reason of being permanently housebound
- have a visual or hearing impairment that resulted from another medical condition for which you are receiving VA care or that resulted from treatment of that medical condition
- have a significant functional or cognitive impairment that affects your daily living, not including normally occurring visual or hearing impairments
- have a severe visual or hearing impairment that hinders active participation in your own medical treatment

VA will furnish hearing aids to veterans who are service connected for any hearing or ear problem if they are 10 percent service connected or above for anything else. Veterans with hearing loss severe enough to interfere with other medical treatment or general occupational or life functioning also may receive a hearing aid. This applies even if the veteran is not service connected for the loss.





Hepatitis C:

Are you aware of this growing health threat?

Hepatitis C is a blood-borne virus that can linger in the bloodstream for decades. Although it may cause no symptoms, the virus slowly attacks the liver, sometimes doing permanent damage. In fact, it is the leading cause of liver transplants.

Experts think about 4 million Americans may currently be infected, but not all of them know it. VA has seen approximately 70,000 veterans who tested positive for hepatitis C. Because the disease is transmitted through contact with contaminated blood, this lack of awareness has contributed to its rapid spread.

How serious is hepatitis C?

It is serious for some but not others. For unknown reasons, the virus sometimes clears on its own, while other times it progresses, causing cirrhosis (scarring) of the liver and liver failure, both of which are irreversible.

Does hepatitis C have any clear-cut symptoms?

Not really. Many with hep-

tis C have none. Others experience mild, flu-like symptoms, nausea, loss of appetite, fever, headaches and abdominal pain.

How do I know if I should be tested?

You should be tested if any of these statements apply to you:

- You had a blood transfusion or organ transplant before 1992.
- You have injected illegal drugs or used cocaine even once.
- You are on hemodialysis.
- You have had multiple sexual partners.
- You have tattoos or multiple body piercings.
- You have come into contact with someone else's blood.

Why should I be tested for hepatitis C?

Early diagnosis is important so you can be counseled about how to prevent transmission of the disease to others. For example, those infected must be cautious with objects such as razors, needles, toothbrushes, tampons, sanitary napkins and nail files. Early diagnosis also ensures appropriate treatment. Three types of interferon (a protein produced by the

body that thwarts viral growth) and a combination of interferon and ribavirin (an antiviral agent) are current treatments. Anyone with hepatitis C should discuss possible vaccination against hepatitis A and B with his or her physician. Lifestyle measures include avoiding alcohol, eating a well-balanced diet, exercising and pacing activities to avoid fatigue.

Is there a vaccine to prevent hepatitis C?

No. That's why it's especially important to prevent the disease from spreading.

What services does VA offer?

VA has established the San Francisco Hepatitis C Research and Education Center at the San Francisco VA Medical Center. The center of excellence coordinates treatment and research efforts, as well as develops education for patients and their families, health care providers and counselors who will advise patients before and after testing.

Hepatitis C testing is available at your local VA. ★

Running out of miracles: Proper use of antibiotics

Most people think of antibiotics as miracle drugs that can quickly wipe out infections. But as you've probably seen in the news, antibiotics themselves are being blamed for the rise of "supergerms" that are tough to kill.

Antibiotics have been available to treat human infections since 1942 when penicillin was used for the first time to treat a streptococcal infection. And in almost 60 years, many infections have been controlled. However, improper use of antibiotics can have disastrous effects, creating incurable bacterial infections. About 20 percent to 50 percent of all antibiotic use in the United States is unnecessary. Physicians and patients need to work together to use antibiotics only when absolutely needed to treat bacterial infections.

Resistant bacteria

The concern about antibiotics is that using them frequently or improperly helps breed germs resistant to treatment. Any antibiotic can leave behind some bacteria that can mutate, forming a resistant strain. Because bacteria multiply quickly, creating a new generation every few hours, they can also evolve quickly.



Increased use of antibiotics is helping to speed up this evolution. More than 150 million antibiotics are prescribed each year in the U.S. And increasingly, antibacterial drugs are becoming ingredients in everyday products such as soaps and cleaning products.

This means more and more stubborn strains of bacteria are appearing.

As scary as that may sound, most infections still respond to first-line antibiotics.

And those that don't can usually be wiped

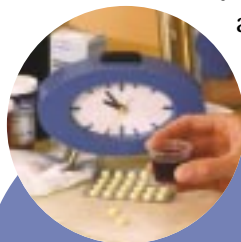
out with more powerful medications. The trouble is that using stronger drugs encourages bacteria to become resistant to those drugs. To keep

pace with ever-evolving bacteria, scientists are developing new antibiotics.

Proper use

Health officials warn if we want to ensure our future ability to conquer infection, we need to be more conservative about antibiotic use now. Taking antibiotics properly can help curb the emergence of tough new bacteria and cut your own risk of future infection. Follow these tips:

- **Finish the bottle.** Don't stop taking the drug just because you feel better. Some bacteria may still be in your system. Not killing them all encourages surviving bacteria to develop a resistance to any future antibiotic use.
- **Don't be tempted by leftovers.** When feeling sick, many people take an antibiotic leftover from a previous prescription. This practice helps bacteria become resistant, setting the stage for untreatable future infections.
- **Don't skip doses.** Doing so causes the level of antibiotic in the bloodstream to drop, providing bacteria with a "breather," and as a result, some may survive.
- **Avoid using antibiotics for colds and the flu.** These infections are caused by viruses, which antibiotics cannot treat or cure. ★



REMINDER

It is flu season; contact your local VA for information on the flu vaccination.

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VA SANTA ROSA OPC
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VA 13th & MISSION CLINIC
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VA SIERRA NEVADA HEALTH CARE SYSTEM

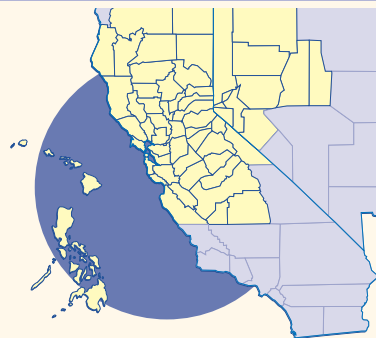
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